

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Apr 10, 2006 8:00 am
Secretary of State

03-23-2006 90256 020 ****50.00

DOCUMENT # L04000091349 1. Entity Name 226 MALVERNE, LLC						
Principal Place of Business C/O WILLA FEARRINGTON, ESQ. 515 NORTH FLAGLER DRIVE, SIXTH FLOOR WEST PALM BEACH, FL 33401			Mailing Address C/O WILLA FEARRINGTON, ESQ. 515 NORTH FLAGLER DRIVE, SIXTH FLOOR WEST PALM BEACH, FL 33401			
2. Principal Place of Business		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.				
City & State		City & State				
Zip	Country	Zip	Country			
4. FEI Number 20-2010887 Applied For Not Applicable						
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required						
6. Name and Address of Current Registered Agent FEARRINGTON, WILLA A ESQ. ARNSTEIN & LEHR 515 NORTH FLAGLER DRIVE, SIXTH FLOOR WEST PALM BEACH, FL 33401			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____			
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.						
SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____						
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State				
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES			
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR MANDELLO, JERRY 216 NOTTINGHAM BLVD. WEST PALM BEACH, FL 33405	☐ Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR M MARCY MANDELLO 216 NOTTINGHAM BLVD WEST PALM BEACH, FL 33405	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP		☐ Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR M MARK BOZILSUE 8814 WENDY LANE SOUTH WEST PALM BEACH, FL 33411	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP		☐ Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR M JOY BOZILSUE 8814 WENDY LANE SOUTH WEST PALM BEACH, FL 33411	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP		☐ Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP		☐ Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP		☐ Change ☐ Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.						
SIGNATURE: <u>Jerry Mandello</u> <u>4/7/06</u> <u>561-670-8096</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #						